PAPER CLAIM ATTACHMENTS AND PRIOR AUTHORIZATIONS

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Paper Claim Attachments and Prior Authorization

The MO HealthNet Program implemented full use of the National Provider Identifier (NPI) for all claims processing on Monday, May 12, 2008. The use of NPI is also being applied to all paper claim attachments and prior authorization requests. Failure to submit an NPI on paper claim attachments and prior authorization requests (faxed or mailed) **beginning July 14, 2008**, will result in the following:

- ➢ Paper Claim Attachments
    - o All paper claim attachments received without an NPI will be denied with invalid provider identifier.

- ➢ Psychological Prior Authorization Requests
    - o Prior authorization requests for psychological services requested by phone will not be accepted without an NPI to identify the provider.
    - o Prior authorization requests for psychological services requested by fax without an NPI to identify the provider will be returned to the provider.

- ➢ Durable Medical Equipment (DME) Prior Authorization Requests
    - o Prior authorization requests for DME services requested by fax without an NPI will be denied as incomplete and a disposition letter will be faxed to the provider.

- ➢ Other Prior Authorization Requests
    - o Prior authorization requests for all other services submitted without an NPI will be denied as incomplete and a disposition letter will be mailed to the provider.

Provider Taxonomy Codes

MO HealthNet is in the process of revising all paper claim attachments and prior authorization request forms to include a Provider Taxonomy Code field. Reporting the Provider Taxonomy Code on claim attachments and prior authorization requests is required for providers that have chosen to use one NPI for multiple MO HealthNet legacy provider identifiers in order to perform the proper crosswalk from the NPI to the appropriate legacy provider identifier.

Until the revised forms are available, providers required to report a Provider Taxonomy Code are asked to print the word **Taxonomy** and the appropriate code at the top of the form. Please see example below.

Taxonomy – 332B00000X

Provider Bulletins are available on the MO HealthNet Division (MHD) (Formerly the Division of Medical Services) Web site at http://dss.mo.gov/mhd/providers/pages/bulletins.htm. Bulletins will remain on the Provider Bulletins page only until incorporated into the provider manuals as appropriate, then moved to the Archived Bulletin page.

MO HealthNet News: Providers and other interested parties are urged to go to the MHD Web site at http://dss.missouri.gov/mhd/global/pages/mednewssubscribe.htm to subscribe to the electronic mailing list to receive automatic notifications of provider bulletins, provider manual updates, and other official MO HealthNet communications via E-mail.

MO HealthNet Managed Care: The information contained in this bulletin applies to coverage for:

- MO HealthNet Fee-for-Service
- Services not included in MO HealthNet Managed Care

Questions regarding MO HealthNet Managed Care benefits should be directed to the patient's MO HealthNet Managed Care health plan. Before delivering a service, please check the patient's eligibility status by swiping the red MO HealthNet card or by calling the Interactive Voice Response (IVR) System at 573-635-8908 and using Option One for the red or white card.

Provider Communications Hotline
573-751-2896